

DECLARATION FOR PATENT APPLICATION (WITH POWER OF ATTORNEY)

As an inventor named below or on any attached continuation page, I hereby declare that:

My residence, post office address and citizenship are as stated next to my name.

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled **MACROMOLECULAR DELIVERY SYSTEMS FOR NON-INVASIVE IMAGING, EVALUATION AND TREATMENT OF ARTHRITIS AND OTHER INFLAMMATORY DISEASES**, the specification of which (check one):

- ☐ is attached hereto.
☒ was filed on August 30, 2006, as United States application serial no. 10/591,258 and was filed on March 30, 2005 as PCT international application no. PCT/US2005/010801.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the U.S. Patent and Trademark Office all information known to me to be material to the patentability of the subject matter claimed in this application, as "materiality" is defined in Title 37, Code of Federal Regulations § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate or § 365(a) of any PCT international application(s) designating at least one country other than the United States of America listed below and on any attached continuation page and have also identified below and on any attached continuation page any foreign application for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America having a filing date before that of the application(s) on which priority is claimed.

Prior foreign/PCT application(s):

			Priority	Claimed
(number)	(country)	(day/month/year filed)	Yes	No
(number)	(country)	(day/month/year filed)	Yes	No

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) or § 365(c) of PCT international application(s) designating the United States of America listed below and on any attached continuation page and, insofar as the subject matter of each of the claims of this application is not disclosed in any such prior application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose to the U.S. Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations § 1.56 which became available

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Invention Title: MACROMOLECULAR DELIVERY SYSTEMS FOR NON-INVASIVE IMAGING, EVALUATION AND TREATMENT OF ARTHRITIS AND OTHER INFLAMMATORY DISEASES

between the filing date of such prior application and the national or PCT international filing date of this application:

<u>PCT/US2005/010801</u>	<u>3/30/2005</u>	<u>now abandoned</u>
(application serial no.)	(filing date)	(status—pending, patented or abandoned)
<u> </u>	<u> </u>	<u> </u>
(application serial no.)	(filing date)	(status—pending, patented or abandoned)

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

<u>60/558,047</u>	<u>3/31/2004</u>
(provisional application no.)	(filing date)

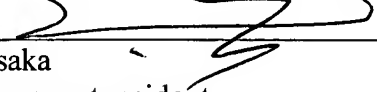
I hereby appoint the Registered Practitioners associated with **Customer Number 24247** to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

Address all correspondence to: Allen C. Turner, telephone no. (801) 532-1922, at the address associated with **Customer Number 24247**, as follows:

TRASKBRITT, PC
P.O. Box 2550
Salt Lake City, Utah 84110

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of first joint inventor: Dong Wang

Inventor's signature  Date 11/3/06
Residence: Omaha, Nebraska
Citizenship: China, US permanent resident
Post Office Address: 15210 Pepperwood Dr., Omaha, NE 68154


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Invention Title: MACROMOLECULAR DELIVERY SYSTEMS FOR NON-INVASIVE IMAGING, EVALUATION
AND TREATMENT OF ARTHRITIS AND OTHER INFLAMMATORY DISEASES

Full name of second joint inventor: Jindrich Kopecek

Inventor's signature _____ Date _____
Residence: Salt Lake City, UT
Citizenship: Czech Republic
Post Office Address: 1103 S. Alton Way, Salt Lake City, UT 84108

Full name of third joint inventor: Scott C. Miller

Inventor's signature  _____ Date NOVEMBER 2, 2006
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Full name of fourth joint inventor: Pavla Kopeckova

Inventor's signature _____ Date _____
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Citizenship: Czech Republic
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AND TREATMENT OF ARTHRITIS AND OTHER INFLAMMATORY DISEASES

Full name of second joint inventor: Jindrich Kopecek

Inventor's signature

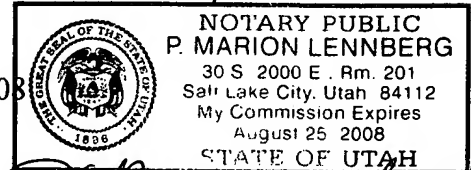
Date

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Residence: Salt Lake City, UT

Citizenship: Czech Republic

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Full name of third joint inventor: Scott C. Miller

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Date

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P. Marion Lennberg

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Date

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P. Marion Lennberg

Nov. 3, 2006

